

An Anarchist's Guide to Surviving Coronavirus COVID-19 a.k.a. 2019-nCoV

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Okay, the epidemic is bloody scary, and perhaps for any number of reasons you can't, or don't wish to, interface with the medical infrastructure. Likely however, you don't wish to succumb to the virus despite this. We have assembled this guide in an attempt to help people take charge of their well-being, and survive this outbreak with as little suffering as possible.

Here's the spoiler: healthcare is simpler than you think. Basically you need to treat this the way you would the flu, except be more vigilant because it spreads more easily, is harder to "kill", and is harder on the system when you catch it.

Ready to take this shit seriously? Okay, here we go.

How to Keep From Catching It

Roughly speaking, while practicing vigilant hygiene, you also want to keep your health up, and stress your system as little as possible.

Hygiene

You can catch viruses from touching things that other people have touched, or breathing in microscopic water droplets from someone who sneezed or coughed.

- Sterilize your disgusting cell phone. Alcohol will do fine. Do it every time you get to a new destination, especially a place where you eat. Consider leaving the thing at home, or at least not pulling it out during mealtimes. Ask a microbiologist about cellphones. You'll wish you hadn't.
- Wash your paws. This is a key one: the place that is most likely to pick up fresh germs is your hands. You turn doorknobs, press elevator buttons, handle money, credit cards, receipts, and so on. Each time you arrive at a new location clean your hands. Make sure you use soap and scrub for at least 20 seconds, and get under your nails. Get yourself a nail brush, it's really a good investment. If you really want to wipe things out, consider getting chlorohexidine and/or ethanol. Doing a good thorough cleansing upon returning home is good practice. Rubbing alcohol is good and cheap. If there's a run on the drugstores and there's none left, you can get it at a hardware store in big jerry cans, usually labeled "Denatured Alcohol". Don't forget to wash the faucet handles as you go as well.
- Wipe down things with alcohol that are common touchpoints: doorknobs, cabinet and refrigerator handles, light switches, faucet handles, and so on.
- Consider wearing latex or nitrile gloves while you are out, and throw them away before you wash your hands upon reaching a destination
- Don't touch your face while you are out. This applies whether you are wearing gloves or not. This is a really hard habit to develop, but if you are wearing gloves, it acts as a good reminder. Seven of the nine entrances to your body live on your face, and your hands are going to touch things while you are out. Don't carry them to the doorstep of your innards.
- Face masks don't really do much. If someone is sick, it can help keep other people from catching it if the *sick person* wears one, but if you are healthy then it's not doing much.

Especially if you don't throw them away each day, in which case you are just creating a warm, moist environment for microbes, and strapping it to your face.

- Consider showering more often, if this isn't one of your favourite things to do. Your hands aren't the only place on your skin where microbes hang out.

General Health and Immunity

This is all fairly common knowledge, but it's important to list them, in case we forget or were never told in the first place.

- Keep yourself hydrated as well as possible. If you hate drinking water, try sparkling water, or add an electrolyte powder or vitamin additive and/or a twist of citrus.
- Try to smoke and drink less. If your body is using energy to deal with your hangover and metabolizing tar, that's energy it can't use for immunity.
- Get fresh air into the house; stagnant air is going to make for breeding ground. Dust and smoke stress the respiratory system and lower immunity.
- Eat quality foods. Same deal as above: if your heart and liver and kidneys are busy processing your double big mac, it's harder to deal with the rest of things.
- Get quality sleep, and plenty of it. I know this is starting to sound like a voicemail from your mother, but let's face it: she's probably right on a few things. Lack of sleep is another one of those basic things that can very quickly turn your immune system from a fortress into a straw shack.
- Decrease your stress levels. And this doesn't mean keep hanging out with toxic people and just doing more drugs to cope. Rather it means do things for self-care. Do the things that make you happy and chill you out. Consider quitting your job and leaving your abusive husband. Tell him it's for science.
- Consider taking a basic multivitamin; maybe also vitamin C, and Zinc. If you really feel like you need an immune boost there are suggestions that astragalus root and thymus extract can help that. Others contest this claim. There have been few studies undertaken to determine the efficacy or lack thereof. There are similar issues with every other folk remedy. Do your own thinking. Decide for yourself.
- Avoid crowded spaces. Okay, this one is hard; public transit and working in jobs where you interface with the public this becomes somewhat unavoidable. Try to keep your distance if you can.
- If you are the sort of person who is avoiding Asian people, there's a special DIY technique that will make it impossible for you to catch the virus: pour a pint glass of household bleach and drink it in one gulp. Thanks, you racist shitbag.

How to Determine if You've Caught It

Okay, so you were really good about staying clear of crowds, you've kept your health up, and wiped every damn thing down with rubbing alcohol, and you got sick anyway. It happens, it's a numbers game; don't be hard on yourself.

So now you're worried whether you just have the flu [which, please note, is also going around at an alarming rate, so it's likely] or if you actually have this scary plague.

The Bad News: It's really hard to figure this out unless you take cultures and sequence the genome of the virus. If you have a biohacking group in your area with some practitioners whose sense of curiosity overshadows their sense of self-preservation you might be able to get one of them to do it for you.

The Less-Bad News: It doesn't really matter. What you need to do in either case is take it seriously, take care of yourself, and not pass it to other people.

When you need to break down and go to the fucking hospital

So the whole bloody point of this thing was to avoid going to hospital. Nobody likes going, and they treat minorities like shit, and a million other things, but we do need to cop to the fact that it would be better to deal with all that than be dead. So we need to know when it's past the point that chicken noodle soup and watching the original muppet show is enough.

If you have respiratory failure, heart failure, or sepsis, these are things which are very difficult to treat at home and survive, and you should probably get to a hospital on the double. Note that the term "failure" in a medical context does not mean things have broken irreparably. Rather, it means it's not working as it should. These are reversible, and not a death sentence.

Here are the signs and symptoms to watch for to know if those things are happening:

Respiratory Failure, Heart Failure, Sepsis

There are a lot of different reasons why the person for whom you're caring might stop being able to get oxygen into their lungs, or their heart is having trouble, or they have a massive inflammatory response. But you don't need to know any of them. Rather, you need to keep an eye out for indicators these processes might be starting so you can get into med-evac mode. Usually there is a really complicated process with a lot of fancy equipment, but you can do it much more simply and cheaply with a few basic tools. It's really useful to have a *thermometer*, a *blood pressure monitor*, and a *pulse oximeter*. You don't *need* them, but they do make things easier. You can get a pulse oximeter online for about twelve bucks. You can get a blood pressure monitor online too. These are a little more expensive, like \$30, but are worth it. Thermometers are also cheap online. If someone is ill, take all the measurements to establish a baseline, and then take them in the morning and in the evening, plus any time you're concerned. Watch for changes. If things change fast, that's a cause for concern. If there is a rapid shift, look for other indicators to determine if one of these critical conditions is occurring.

You can measure pulse with a watch with a second hand. Find the person's pulse on their wrist, and count the beats for a full minute. You should have something between 60 and 100 beats. If not, it's a sign that things are likely not so great. If you don't have a thermometer, you can compare their forehead to your own by placing one hand on their forehead, and one on your own. Try to

hold on to the memory of how this feels, because you want to be watching for changes. If you manage to take their temperature, you want to make sure it's between 97°F [36°C] and 100°F [38°C]. If you are taking their blood pressure and it changes by 20 points, it's not a good sign.

Decide *in advance* how you plan to get to a hospital [and which one], in case any of these things starts happening. You don't want to be figuring this sort of thing out during a moment of crisis. The pulse oximeter will measure someone's pulse and the percent of oxygen that is in their blood. If blood oxygenation falls below 90% you need to get them some care. If you have the sports oxygen cans, try giving them hits from that as you monitor them on the way to the hospital. That said, if the numbers are good but someone is having a *really* hard time breathing [more than just someone coughing and feeling shitty the way you do when you're sick], you need to get them to a hospital. If someone's lips and/or fingertips start to get grey and blue, and they are *labouring* to breathe, this is sign of impending respiratory failure no matter what the oxygenation levels are. Get them down the road double-quick. Other indicators of this are hunching over to breathe, not being able to get through a sentence without running out of air, or taking small shallow breaths quickly. If their breathing sounds really wet, or like static crackling, or if they cough up pink frothy gunk, it's time to sound the alarm.

If you're managing to keep your person hydrated, but they still wake up with a massive headache, or go the whole day without needing to pee, these are also bad signs. Two other things to watch for: if anyone is so sleepy that when you wake them up, they nod right back off again and you can't keep them awake, it's a bad sign. The other sign is if someone seems grumpy. Check to see if they are mentally confused, but asking some questions about what day it is or where they are. If you get strange answers, it's time to get them out the door.

How to Care for Someone Who Has It

Okay, let's say the person doesn't need to go to the hospital yet, but they are still sick and you need to treat them. What to do?

Comforting

This cannot be overstated: you are caring for a *human being*, and the more you keep them relaxed and happy and feeling loved, the greater their likelihood of recovery. The limbic system supports the immune system. A happy person's immune system works far better than the immune system of someone who is not. Where is their teddy bear? Where is their childhood blanket? Their cat? Bring them!

Do remember that despite the fact that the virulence of COVID-19 is high, the mortality rate is low. Thus far it is about¹ 2% fatal. In all likelihood it won't be much different than getting a shitty flu, or going on a bender, and the person in question will recover.

¹ This number is really rough, and is wrong to some degree because there is a time lag between confirmation and death, which makes error on the underestimate side. However, there are scores of people who contract it and do not report to hospitals and recover fine, which makes this a massive overestimate. Additionally, there is evidence that the Chinese government is covering up nCoV deaths by calling them "pneumonia", and not reporting them, which makes for error on the underestimate side again. China is also using very old slow technology to do diagnosis, and can only do a few thousand per day, so that limits the data as well. So there are numerous errors here. This is just to say this isn't accurate, but the fatality rate is only a in the single-digit percent range.

Try to explain to them that the likelihood of it being more than a bad week is very low, so they don't get stressed and make it worse.

Keep them warm, but not hot. Get them their favourite healthy food and snacks, and play them their favourite guilty pleasure movies, and don't tease them about them. Seriously.

Read them their favourite childhood book. Don't make fun of this one either.

Bring out their favourite board game, and play it with them, even if you hate it. Yes, don't gripe.

Remind them that their survival brings the revolution closer, and that them taking it easy and allowing themselves to be cared for is an act of political warfare, just like Audre Lorde said.

If they really want a drink, make them a hot toddie instead of tequilla shots or beer. Try to not give them too many.

If they are desperately craving a cigarette, get some chew/dip/snus/snuff, and put a pinch of it between their pinky toe and the one next to it, this will give them their nicotine fix without stressing their lungs. You can do it on both feet if they are heavy users and need a harder hit.

If they really want weed, try to give them edibles instead of smoke, so they don't stress their lungs.

If they are going to get junk sick if they don't push off, do everything you can to help them do so safely.

Hydration

If you were in the hospital you'd get a saline IV, which is the fastest and most efficient way to get fluids into the body. However, if you live in certain countries like the so-called "united states", these are not available to the public, despite being the fastest way to hydrate someone.

Setting up an IV is not hard, if you manage to get your hands on a bag and a kit [cough cough eBay]. If you can't, there are easy ways to make oral rehydration fluids which are better than gatorade or coconut water:

The idea is to take clean water and add some balancing salts to make it easier for the person to retain the water. Try to get them to take small sips very often, as this is the most efficient way to get fluids into someone short of an IV.

Get distilled water, sugar or honey, salt, and baking soda, and, if you want to make it a little more palatable, a little coconut water, orange juice, or mashed up ripe banana.

IV in a Glass

- 1 Liter of bottled water
- 1/4 teaspoon salt
- 1/4 teaspoon baking soda
- 2 *tablespoons* of sugar or honey
- *Optional*: 1 cup coconut water/fruit juice/ripe fruit puree

Start by adding the salt, but make sure you didn't overdo it. It shouldn't be more salty than tears. Then add the rest of the ingredients.

Three teaspoons equals one tablespoon, if you one have one or the other.
If you are working in gallons [which are roughly quadruple liters], just quadruple everything.
These are rough measurements, so don't worry too much. Just make sure it's not too salty before you add the rest.

Staying Clean

Try to get them up and into a shower each day. Change the sheets while they are in there, and give them clean, comfortable clothes when they get out. This isn't just a sanitation issue, this will also make them feel better in terms of morale. Happier is healthier.

Oxygen

Similar deal to an IV, you can't just waltz into a medical supply place [if you are in the former british colonies] and get an oxygen tank, but there are ways to jerry-rig one.

Theoretically you could use oxygen from welding tanks, but it might be daunting to put the regulators and stuff in place if you haven't worked with compressed gas. If the person for whom you are caring is in such dire straits that they need oxygen all the time, they should be in the hospital anyway. You can however get little cans from sports stores which will allow you to give the person for whom you are caring hits of oxygen from time to time. The idea here is to take the stress off their lungs and heart to get oxygen into their blood. Good times to give them hits are before bed and after hydrating first thing in the morning.

Do *NOT* Give Antibiotics!

Antibiotics are designed to kill bacteria. They do nothing to viruses, and you will stress the system of the person you are giving them to, and it will make them worse.

What About That Alleged “Cure” From Thailand? Or that other thing I heard about?

There's really not much data on any of this. It seems like the Thailand thing worked in one case, but that might have been a fluke. Additionally other people they tried it on had really nasty reactions to the antiviral drugs [which is not atypical], so it's a real diceroll if you decide to try it. However we're never ones to shy away from self-experimentation, here's all the data that we've been able to find as of this moment. As time passes hopefully we'll get some tactics established. If you learn of anything, please get in touch. There is a clinical trial going on in China for the “Thai” treatment as well.

Also, keep in mind that in all likelihood you won't know if you have coronavirus or the flu, and taking heavy doses of antivirals can have plenty of heavy side effects. So decide carefully where you think the breakpoint is for doing more harm than good. The Thai patient was given Oseltamivir, Lopinavir and Ritonivir.

Oseltamivir is sold under the trade name TamiFlu, and is prescription only. It's a controversial drug, and some physicians will refuse to prescribe it, so if you go out doctor shopping in order to

get your hands on it, be aware you might have to shop a lot. But it is an antiviral and theoretically it makes the flu pass more quickly.

Then there is the matter of the two HIV drugs lopinavir and ritonavir, They are approved, are on the market, and are sometimes packaged together under the trade name Kaletra.

Currently the dosage for HIV is lopinavir 400 mg/ritonavir 100 mg. And there is still no data on the dosages used in the experimental case, they merely said “High dose”, so good luck guessing. Maybe start by tripling the regular dosage.

Any other possible treatments/cures?

A paper was just released showing that Chloroquine and Remdesivir (development code GS-5734) does kill the virus *in a test tube*, but things are way more complicated in the human body. That said, there is one person who was given the drug combination, and they recovered. That doesn’t mean that’s why they recovered, but it is suggestive. Additionally, they are starting ad hoc trials on this as well China, so it seems like it’s promising.

Remdesivir is really hard to get a hold of. It’s not in production since it has not been approved, and it’s not on the market. There is one company making it for the clinical trials in China, but it’s not being sold. It’s a strangely shaped new molecule, so not even regular chemical suppliers stock it. There are ways you can potentially get it from overseas, but it’s rolling the dice again, as it can be hard to know if what you are getting is the real thing or just vials of water. There is the “Feline” version GS-441524 which is an active, non-prodrug form that is available, though it is expensive. If you are planning to get this, get it while you can: prices are going up, and stocks are being depleted.

The published paper on the patient who may have been cured with it does not give dosage information. It does mention that he was given a single IV infusion, which suggests that, if it was modeled after the ebola trial, the dosage would be either the low dose of 50 mg/kg or the high dose of 150 milligrams per kilogram of body weight. We are guessing it was probably the high dose. Dosage for chloroquine is 300mg base (500mg salt), given once per week, so it’s probably just one dose. For children it’s 5mg/kg.

Chloroquine is used in the prevention and treatment of malaria, but its use has created resistant strains. So if you want to get it from a doctor by claiming you are traveling to a malaria-rich area, you need to find an area rich in malaria which hasn’t mutated to be Chloroquine resistant. Check the CDC website if you’re hoping to go this route.

Keep Each Other Safe

Do what you can with what you’ve got, and odds are things will blow over okay. Remember to get help if it gets dangerous.

Act Up. Fight Back.

Much Love,
—FTVC

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